

BROOKE BLUEBONNET BROADCAST

VOLUME I
NO. 19



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Annex II, Brooke General and Convalescent Hospital

Photo by Wingate.

OFFICIAL PUBLICATION
BROOKE GENERAL and CONVALESCENT HOSPITAL
AN ARMY SERVICE FORCES INSTALLATION
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BROOKE BLUEBONNET BROADCAST

AUTHORIZED BY

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COMMANDING
BROOKE GENERAL HOSPITAL

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(Official United States Army Photos)

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THE CHAPEL

SCHEDULE OF RELIGIOUS SERVICES AT BROOKE GENERAL HOSPITAL

NEW HOSPITAL CHAPEL:

Sunday

Catholic Mass _____ 6:15 A. M. & 8:30 A. M.
 Protestant Worship _____ 10:00 A. M.
 Protestant Vespers _____ 7:00 P. M.

RED CROSS AUDITORIUM, NEW HOSPITAL:
 Sunday School for Children _____ 10:00 A. M.
NEW HOSPITAL CHAPEL:

Weekdays

Catholic Mass, daily except Wed. _____ 5:30 P. M.

Catholic Mass, Wednesday _____ 8:30 A. M.
 Protestant Vesper Service Wed. _____ 7:00 P. M.
RED CROSS AUDITORIUM, OLD HOSPITAL:
 Sunday
 Catholic Mass _____ 10:00 A. M.
 Protestant Worship _____ 9:00 A. M.
 Protestant Vespers _____ 5:30 P. M.
 Weekdays
 Protestant Vesper Service, Wed. _____ 5:30 P. M.

"PASSING THE BUCK"

Of all the games with which we are acquainted the most ancient is that which we commonly call "Passing the Buck." It had its origin in the Garden of Eden with Adam and Eve. All of us know the Bible story in which Adam said: "The woman gave me the fruit of the tree and I did eat," and Eve said: "The serpent deceived me and I did eat." It is the first historical description of a weakness which seems to have spared no one down through the ages. The young and the old, the rich and the poor, the great and the lowly, all suffer from the "buck-passing fever."

Be it a group of boys playing ball on a city lot, or a gang of thugs arrested in a burglary plot, each individual denies his part in the breaking of the window or in the fatal shooting of the watchman. Each one accuses the other fellow. History provides us with many examples of "passing the buck." In the trial of our Lord, Pilate washed his hands and passed on the fulfillment of his responsibility to some one else. The classic example is Nero, fiddling away while Rome burned. He blamed the Christians for the fire but did nothing to stop it. He passed the buck instead of passing the bucket. We ourselves often-times engage in that age-old game, sometimes deliberately, at other times through force of habit. We blame the weather for our fits of ill-temper. We pass on the accomplishment of our duties to others on the score that we are too busy to look after it personally, or on the flattery that the other fellow can attain better results than we. We consider ourselves expert if we can get away with "passing the buck" to our neighbor.

A day will come in the life of every person when there will be no "passing of the buck." On that last day every man and woman to the very last will own up to his or her shortcomings. Mea Culpa will be the unharmonious chorus of countless souls on that day. Those of us who practice those words in this life will know how to sing them well; it will be a melody for all to admire.

Chaplain Thomas A. Hiznay.

"Eisenhower's Emissaries" Aid In Speeding Production of War Needs



—Photo by U. S. Army Signal Corps.

MORE FIREPOWER FOR EISENHOWER: Five combat artillerymen, taken from front line fox holes in Germany and returned to this country to tell munitions workers of the urgent need for more artillery and mortar shells, are extended a personal welcome to the Eighth Service Command by Major General Richard Donovan, commanding general. Shown with Captain Ellison Miles, left, in charge of the group, and General Donovan, they are: Staff Sgt. Edward R. Bearden, Waco, Texas; T/5 Cornell C. Dobbs, Hanson, Oklahoma; Pfc. Oscar Woodard, Jr., Elmwood, Tenn.; Cpl. Facundo B. Anaya, Albuquerque, New Mexico, and Pfc. Marshall T. Thompson, Eagle Grove, Iowa. All of the men wear the bronze star and other citations for courage under fire.

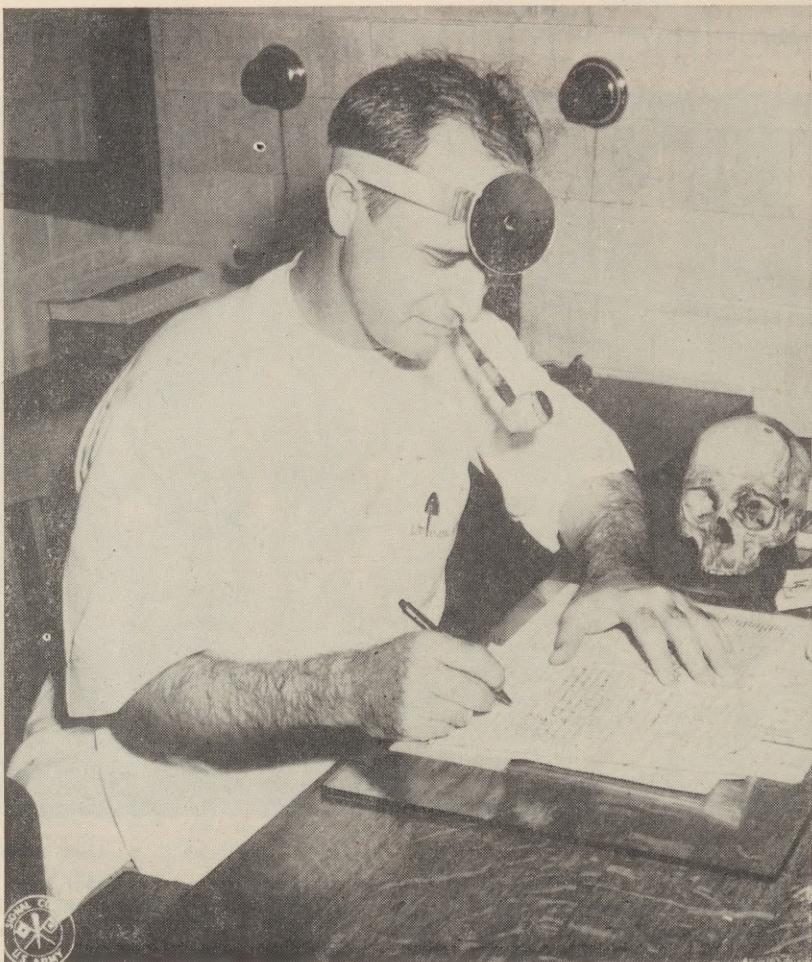
In a concentrated effort, the Eighth Service Command is striving to increase the production of three critically needed war materials—shells, tires and cotton duck canvas.

Through a program that includes bringing soldiers direct from the battlefronts to emphasize the need for materiel and placing furloughed GIs on production lines, the command is adding impetus to a nationwide drive to keep supplies moving. In addition, Major General Richard Donovan, commanding general, has directed the strictest conservation and salvage program in command history.

The "production urgency" program is under the supervision of Brigadier General E. H. Marks, Eighth Service Command and Southwestern Division Engineer, who has also been designated as the Army Service Forces Regional Representative for War Production in Texas, Oklahoma and Louisiana.

Specifically, Gen. Marks is calling for a step-up in the production of 61 and 81 millimeter mortar shells, 105 millimeter artillery shells, tires—particularly of truck size—and cotton duck canvas for tentage. Shell production in the Southwest must

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—Photo by U. S. Army Signal Corps

Lieutenant Colonel Lee K. Emenhiser

CHIEF OF THE

EAR, NOSE AND THROAT SECTION

BROOKE GENERAL AND CONVALESCENT HOSPITAL

(Story on Page 5)

The Ear, Nose and Throat Section

BROOKE GENERAL AND CONVALESCENT HOSPITAL



CHIEF of the Ear, Nose, and Throat Section is Lt. Col. Lee K. Emenhiser, M. C., Army of the United States. He was born 7 December 1906 on a farm near Frederick, Oklahoma, the son of Milam L. and Emma E. Emenhiser. His parents, who have been married 61 years, still live at Frederick near the farm which they homesteaded in the Oklahoma Territory in 1901. Lt. Col. Emenhiser lived on this farm until 1923, receiving his early schooling in a one room schoolhouse near the Red River.

Lt. Col. Emenhiser graduated with his Doctor of Medicine degree from the University of Oklahoma in June 1931. Following his graduation, he taught Gross Anatomy in the Medical School of the University of Oklahoma for five years. He then took a two years' residency in Ear, Nose, and Throat at Washington University Clinics and Allied Hospitals at St. Louis, Missouri.

Lt. Col. Emenhiser conducted a private practice in Ear, Nose, and Throat at Oklahoma City, and was on the Clinical Ear, Nose, and Throat Staff of the University of Oklahoma Medical School there until being ordered to extended active duty as a reserve officer at Brooke General Hospital, Fort Sam Houston, Texas, on 27 January 1941.

Lt. Col. Emenhiser was commissioned 1st Lt. in the Medical Corps Reserve in March 1933; promoted to Captain in May 1937; and before entering extended active duty in 1941, he served six Summer tours of duty as a medical officer at Fort Sill, Oklahoma. In December 1941 he was promoted to Major, and on 2 March 1942 was designated Chief of the Eye, Ear, Nose, and Throat Service at Brooke General Hospital. He was promoted to the rank of Lt. Col. in October 1942.

Lt. Col. Lee K. Emenhiser is a Diplomate of the American Board of Otolaryngology and a Fellow of the American Academy of Otolaryngology. His hobby is collecting military shoulder patches.

The Ear, Nose, and Throat Section is a section under the Surgical Service, and is divided as follows: (a) Ear, Nose, and Throat Clinic, and (b) Ear, Nose, and Throat Wards.

The Ear, Nose, and Throat Clinic is located in the New Hospital Building on the first floor in the Out Patient Department. Here, Brooke Staff officers, mem-

bers of the Medical Detachment, patients referred from various clinics and wards of the hospital for consultation are cared for, as well as consultations referred from Fort Sam Houston Post Surgeon's clinics and dispensaries, also consultations referred from the nearby War Department Personnel Center and the San Antonio Army Service Forces Depot. If hospitalization is not necessary, a complete work-up of the patient is done in this Clinic. In the past year of 1944 there was a daily average of 66.24 E. N. T. patients and 32.23% of these patients were civilians (dependents of military personnel). Minor surgical procedures such as myringotomies (incisions of the ear drums), puncturing and irrigating sinuses, and removing of foreign bodies from ears, nose, or throat, are done in the E. N. & T. Clinic. 550 major operations were done last year in the Ear, Nose, and Throat Operating Rooms.

Ear, nose, and throat patients are admitted to the different wards as follows:

Medical cases, Officers, Ward 3
Surgical cases, Officers, Ward 2
Enlisted men, Endoscopy cases, Ward 6
Women, Medical cases, Ward 12
Women and Children, Surgical cases, Ward 11
Children, Medical cases, Ward 60A
Enlisted men, Infectious Medical cases, Ward 34
Enlisted men, ENT Surgical cases, Ward 51A

The first five wards listed are in the New Hospital Building; Ward 60A is the Children's Ward in Annex III; Ward 34 is at the Old Hospital; and Ward 51A is in Annex II. Patients are flown by plane frequently to Brooke General Hospital from surrounding posts and camps for removal of foreign bodies from the air and food passages. Infectious acute upper respiratory diseases are on separate wards from the ENT surgical cases in order to prevent surgical infections of operative wounds.

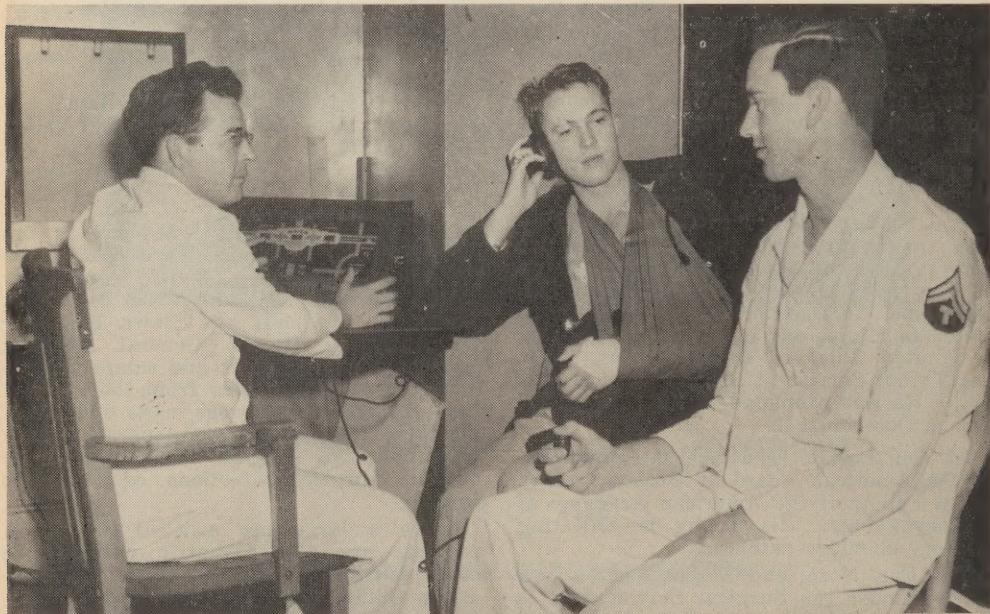
Since a large per cent of E. N. T. patients are also Pediatric cases, close cooperation is maintained with the Children's Clinic and Children's Ward.

Battle Casualties are being admitted with injuries to air and food passages with chest complications, so endoscopy cases are cared for with the Chest Surgery Section.

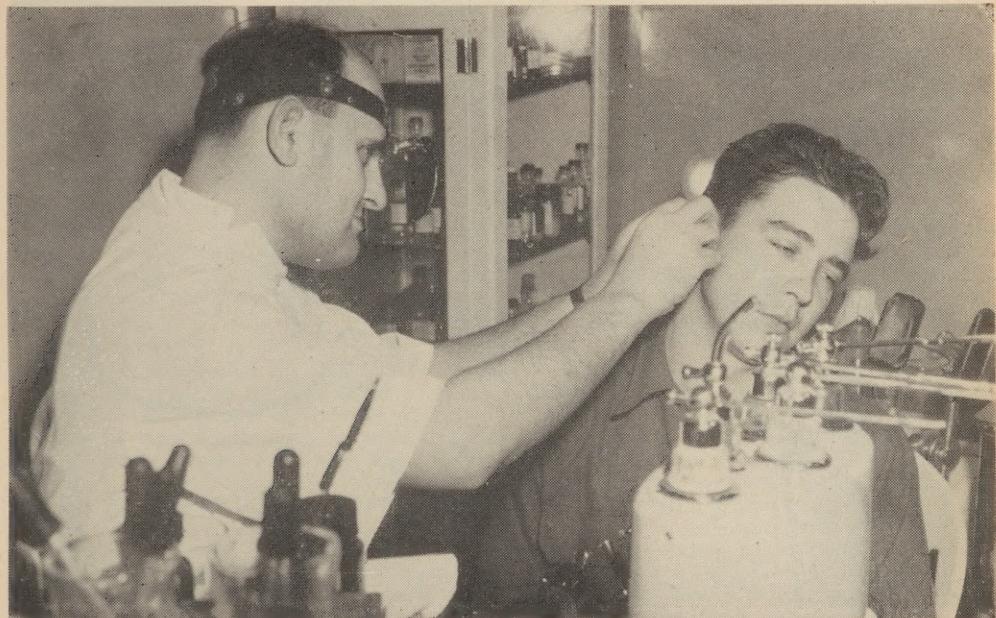
The Chief of Section, Lt. Col. Lee K. Emenhiser, is assisted by Major Virgil S. Steele and Captain Sidney H. Duboe.



The Reception Desk, Ear, Nose and Throat Section at Brooke where patients report for treatment. Left to right, Technical Sergeant Frank L. Evans of Wilkes-Barre, Pennsylvania, takes a phone call while Technical Sergeant Jay K. Moseley, patient, of Warren, Arkansas, registers with Miss Gladys Mitchell, clerk-typist of El Dorado, Arkansas. The civilian nurse on duty in the section is Mrs. Viola E. Noland of Los Angeles, California.



Private First Class Carl Wright, patient, of Chandler, Oklahoma, who recently returned from combat duty in France, gets a hearing test in the Ear, Nose and Throat Section at Brooke. Private Floyd N. Simpson of DuBois, Pennsylvania, DMD, operates the Audiometer which determines loss of hearing. He is assisted by Corporal Technician Harold L. Rang of Hayward, Wisconsin, DMD.



Captain Sidney H. Duboe of Chicago and Phoenix, assistant to Lieutenant Colonel Emenhiser in the Ear, Nose and Throat Section, is making an ear examination. The patient is Staff Sergeant Talmadge Hutchins of Meadville, Mississippi..



Lieutenant Colonel Lee K. Emenhiser, Chief of the Ear, Nose and Throat Section, sprays Mrs. Tomi Allison's throat as a treatment for throat infection. Mrs. Allison's husband, Major General Allison, is with General Montgomery's forces in Europe.



Major Virgil S. Steele of San Antonio, Texas, assistant to Lt. Colonel Emenhiser in the Ear, Nose and Throat Section at Brooke, does a tonsilectomy on Private A. C. Cox of Liberty Hills, Texas, in one of the operating rooms of Annex II.



Major Steele makes ward rounds with Second Lieutenant Elizabeth Pringle, head nurse at Annex II, dictating necessary observations to the secretary, Miss Mary Jo Sturges. The patient is Staff Sergeant John C. Lowe of Kouts, Indiana.



VIRGIL S. STEELE, Major, M. C.

Major Virgil S. Steele was born 18 October 1905 at Eastland, Georgia, the son of Mr. and Mrs. John T. and Eugenia H. Steele. Due to having suffered sore throats and earaches at an early age he was unable to start to school until he was eight. After having his adenoids and tonsils removed at that tender age, he decided that he would some day become a doctor.

Major Steele attended the University of Georgia, taking R. O. T. C. and a business course. He graduated in 1928 with a B. S. degree in Commerce and a Second Lieutenant's commission in the Infantry Reserve. In 1931 he was promoted to First Lieutenant, Infantry Reserve. Immediately following his college business education he entered the University of Georgia Medical School, graduating with his M. D. in June, 1933, and changing his First Lieutenancy in the Infantry Reserve to First Lieutenancy in the Medical Corps Reserve.

Major Steele served as Medical Officer with the Civilian Conservation Corps the eleven months following graduation and then interned for 12 months at the Station Hospital, Fort Sam Houston, Texas, from July, 1934, to July, 1935. On finishing his internship he was assigned to the Eye, Ear, Nose, and Throat Service at the Station Hospital at Fort Sam Houston and served on this Service until April, 1942, except for a period of ten months in 1940 when he was on the E. E. N. & T. Service at Station Hospital, Randolph Field, Texas. He was promoted to Captain in May, 1937, and to Major in August, 1942.

Major Steele served 23 months in the Southwest Pacific Area from May, 1942, until April, 1944, with the Medical Corps in Australia, Thursday Island, and British and Dutch New Guinea.

After returning from overseas service, Major Steele was assigned to the Ear, Nose, and Throat Section at Brooke General Hospital in July, 1944.

Major Steele's hobbies are baseball, table tennis, and badminton.

SIDNEY H. DUBOE, Captain, M. C.

Captain Duboe was born 14 July 1908 near Pinsk, Russia (this part of Russia became part of Poland after World War I); he lived in this war-torn country and was unable to attend school until he migrated with his mother, brothers and sister to join his father in Chicago, Illinois, in March 1921. His parents, Mr. and Mrs. Louis Dubofsky, now live at Phoenix, Arizona. All members of the family are naturalized Americans.

Captain Duboe graduated from high school in Chicago and from the University of Illinois College of Medicine June 1935. He served a one-year rotating internship at St. Bernard's Hospital, Chicago, followed by the position as Junior Physician at Jacksonville State Hospital, Jacksonville, Illinois, for eighteen months. He completed an eight-months postgraduate study at the University of Pennsylvania in Ear, Nose, and Throat and in the removal of foreign bodies from the food and air passages. He served an eighteen-months residency in Ear, Nose, and Throat from July 1939 to January 1941 at Cincinnati General Hospital and University of Cincinnati Medical School, Cincinnati, Ohio.

Captain Duboe was commissioned a First Lieutenant in the Medical Corps Reserve July 1936, and was ordered to active duty February 1941, reporting to Station Hospital, Camp Barkeley, Texas, for his first assignment where he remained on duty until being ordered to overseas duty in May 1942. He was promoted to Captain, October 1941. Before being ordered to extended service duty in 1941, he served several summer tours of active duty.

Captain Duboe served twenty-seven months in the Southwest Pacific Area from May 1942 to August 1944 with the 360th Station Hospital and the 17th Station Hospital.

Captain Duboe is a Diplomate of the American Board of Otolaryngology and a Fellow of the American Academy of Otolaryngology. His hobby is photography.



KEEP ON BUYING WAR BONDS



—Official U. S. Army Photo.

Lieutenant Colonel Harvey C. Maxwell

CHIEF OF THE

EYE SECTION

BROOKE GENERAL AND CONVALESCENT HOSPITAL

(Story on Page 11)

The Eye Section

BROOKE GENERAL AND CONVALESCENT HOSPITAL



IEUTENANT COLONEL Harvey C. Maxwell, Chief of the Eye Section of Brooke General Hospital, who entered the Army from Santa Ana, California, has had a colorful career both in the Army and in Civilian life.

Colonel Maxwell has devoted his practice exclusively to eye, ear, nose and throat since 1928 when he became interested in this specialty while taking a postgraduate course at the Army Medical School in Washington, D. C. Since that time he has studied extensively both in the United States and abroad, and acquired many honors in national and international organizations in his specialty. In 1934 he was Chief of the Department of Ophthalmology of Letterman General Hospital in San Francisco and had begun to attain national recognition as a specialist in ophthalmic and facial plastic surgery. In 1935, in order to continue to practice his specialty exclusively, Col. Maxwell resigned from the army. He entered private practice in Santa Ana, California, where his practice gradually expanded into the present Maxwell Clinic of that city.

The professional qualifications of Lt. Col. Maxwell are listed in the Professional Press—1945 Year Book of EENT Specialists as follows:

A. Maxwell, Harvey C. ('00), B.S., B.M., M.D., F.A.C.S. Fellow Amer. Acad. Oph. & Otol., The Maxwell Eye, Ear, Nose & Throat Clinic, 1718 N. Main St., Santa Ana, Calif., Univ. of Minnesota Medical School, Minneapolis, 1926. Certified by Am. Board of Ophthalmology 1934, and Am.Bd. of Otolaryngology 1934. P.G.: Univ. of Vienna, certificate in Oto-laryng. and Facial plastic surgery: Allgemeine Poliklinik, Wein, Austria, Ophthalmology; Univ. of Paris, France, Eye Surgery, Clinique Ophthalmologique de la Faustelle, L'Hôtel Dieu. Harvard Medical School, Boston, Mass., Maxillofacial Plastic Surgery Course for Military Surgeons. Graduate of Army Medical School, Wash.D.C., 1927; Med.Fie'd Service School, Carlisle, Pa., 1928; Chemical Warfare School, Manila, Philippine Islands, 1929; Flight Surgeons Course, School of Aviation Medicine, Randolph Field, 1942. EENT Staff U.S. Army General Hospitals 1928-36. Asst. Chief EENT Dept. Letterman Gen. Hospital, San Francisco, 1931-33; Chief of Dept. of Ophthalmology, Letterman Gen. Hospital, 1934-35. Exec. Off. and Consultant in Ophthalmology, Brooke Gen. Hospital, Ft. Sam Houston, Texas 1944. Director and Chief of Ophthalmology, The Maxwell Clinic, Santa Ana; Staff member in EENT, Orange County Hospital; St. Joseph's Hospital; Santa Ana Community Hospital. Designated Ophthalmologist; U. S. Vet. Adm. for Orange County, Calif. State Crippled Children's Assoc., and U. S. Civ. Aeron. Association. Member, Orange County Med. Assn.; Calif. State Med. Assn.; Minn. State Med. Assn.; Amer. Med. Assn.; Assn. of Military Surgeons, Am. Acad. of O.

& O.; Los Angeles Research Study Club; Los Angeles Eye, Ear Nose, and Throat Society; Amer. Med. Assoc. of Vienna; E.E.N.T. & Facial Plastic Surgery.

Colonel Maxwell reentered the Army in 1942 when he rejected a proposal to become West Coast Consultant in Ophthalmology in order to volunteer with the air corps. He was immediately accepted, and after graduation from the Flight Surgeons Course at Randolph Field was assigned to Douglas Army Air Field, Douglas, Arizona, as Commanding Officer of the Hospital and Post Surgeon. In January of 1944 he was transferred to a General Hospital at his own request due to the shortage of qualified specialists and his desire to return to professional work. First assigned to the 187th General Hospital at Longview, Texas, as Chief of the EENT Service, he was almost immediately transferred to the Brooke General Hospital where he has served as Executive Officer and Consultant in Ophthalmology prior to becoming Chief of the Eye Section.

Colonel Maxwell has written and lectured extensively on Eye and Facial plastic surgery. His original article in the Military Surgeon in 1934 on the new multiple puncture operation for retinal detachment published in the first three cases of successful reattachment by this method ever performed in an army hospital. He is a recognized authority on the correction of eye muscle disorders and strabismus in children. At present he is greatly interested in the field of plastic ocular prostheses (artificial eyes) and the orbital surgery connected with proper rehabilitation of this type of war casualty.

The Department of Ophthalmology at Brooke General and Convalescent Hospital is officially designated as The Eye Section of the Surgical Service.

The Eye Section is organized to form an eye center with an eye clinic, eye wards, plastic eye laboratory and eye surgery all in close proximity in Annex II.

The section consists of the following departments: Eye Clinics, Eye Wards, Artificial eye laboratory and Eye surgery.

EYE CLINICS

The main clinic situated in Annex II handles all outpatient treatments for eye ailments and the fitting of glasses.

Clinic facilities are also maintained in the New Hospital for eye care of patients
(Continued on Page 14)



The Waiting Room of the Eye Section, Annex II, Brooke General and Convalescent Hospital where practically all cases of eye ailments and the fitting of glasses are handled.



Corporal Milton Berg of Lansing, Michigan, does a retinoscopic examination on Technical Sergeant Victor Weisinger of Lufkin, Texas, to determine refractive errors of the eye.



Lieutenant Zugsmith uses the slit lamp in doing a biomicroscopy on the eye of Staff Sergeant William Kegin of Kansas City, Kansas, a member of the Reconditioning Unit of Brooke.



Lt. Colonel Maxwell performing an eye operation in one of the five operating rooms located in Annex II at Brooke.



Glasses are being fitted on Private Alphonso Gisler, an out-patient, by Technician Fourth Grade Paul L. McDermott of Dayton, Ohio, in the Eye Section, Annex II at Brooke.

THE EYE SECTION

(Continued from Page 11)

hospitalized in the New Hospital and Annex I.

EYE WARDS

The Eye Wards hospitalize all patients requiring hospital care for eye treatment or eye surgery. The main ward is in Annex II in close connection with the plastic eye laboratory and the main eye clinic.

Women and children are hospitalized for this care in Ward 11 and officer patients in Ward 2 of the New Hospital Building.

THE ARTIFICIAL EYE

The artificial eye laboratory is a highly specialized department of the eye section where artificial eyes are made to order and carefully matched and fitted to the individual. This department works with the plastic surgeon to fit a realistic and life-like prosthesis that is of tremendous value in rehabilitating this type of battle casualty. (See story on Page 15 this issue.)

Skilled dental technicians trained in commercial art, work in this section.

OPHTHALMIC SURGERY

The eye surgery is a complete unit in Annex II equipped with every modern facility for the plastic repair of orbital wounds and general eye surgery. The location of the surgery in connection with the eye clinic, eye wards and artificial eye laboratory is ideal for the complete rehabilitation of the many eye casualties evacuated to this center from outside areas.

Besides Colonel Maxwell, Major Dickson, Major Marcks and Lt. Zugsmith, other personnel of the Eye Section includes T/4 Iva B. Tadlock, NCO in charge of the Eye Clinic; T/4 Paul McDermott, Pfc. Hugo Olson, T/5 Robert Werner, T/3 Louis Auburn and Private Floyd Simpson, all opticians and T/4 Kenneth L. Williams, T/4 Robert J. Davis and T/5 Milton L. Berg, Optometrists. Civilian Personnel includes: Dorothy Gilligan, Ann C. Williams and Lucille G. White, all assistant clerk-typists and Mary Helen Simpson, Junior Clerk-stenographer.

**February Is Accident Prevention Month
Drive Carefully . . . Walk Safely . . . and
Observe All Traffic Rules**

The Artificial Plastic Eye Laboratory

BROOKE GENERAL AND CONVALESCENT HOSPITAL



ARTIFICIAL eyes made of water-clear plastic that can be tinted to duplicate every appearance of the natural eye now are being created by skilled technicians in the Artificial Plastic Eye Laboratory at Brooke General and Convalescent Hospital, for the use of wounded veterans and soldiers inducted with glass eyes.

The new eyes duplicate in appearance the coloring of nature's own because every effort is made to construct them anatomically exactly like the natural eye. Each layer of color in the artificial eye—the iris, the pupil, the eye ball and the tiny network of red veins—is placed in the artificial substitute as nearly as possible as it occurs in a real eye ball.

The fitting of the artificial eye into the socket is done so exactly and so well that considerable movement is possible, and the artificial appearance of a staring orb is thus avoided. The new product is lighter than a glass eye and soldier patients who have already had a glass eye say the new plastic eyes feel better.

The construction of the artificial eye is a detailed step-by-step procedure, but each stage in the process is itself relatively simple.

The first step is to paint a thin celluloid disc which becomes the iris of the eye and duplicates the exact shading of the patient's natural eye that it will match. The iris of the human eye, says Captain Erpf, one of the men responsible for developing plastic eyes, ranges in size from 11 to 13 millimeters in diameter and each patient has the iris of his good eye measured for size at the start. The iris of blue eyes requires four colors to produce its exact shade. Hazel eyes require three colors and brown eyes only two.

The paints used are standard oil pigments chosen for their permanent color when exposed to light. The experts work with seven shades: flake white, ivory black, cobalt blue, green oxide of chromium, burnt amber, cadmium yellow, venetian red.

Next, the technician paints on lines that go from the hole in the center of the disc (that will be the pupil) and radiate outward. These lines are called the stroma and are seen in every normal eye.

Then the color of the stroma is mixed with additional brown and painted on the inner circle around the pupil, the region called the collarette.

Finally, additional yellow is mixed with the shade used for the collarette area and the iris is given a superficial overlay of this new shade, which looks like colored fly specks with tiny tails that are individual for every eye.

Holding the thin celluloid disc, which is only one ten thousandths of an inch thick, in tiny forceps, the technician turns the disc over and paints the back with a heavier coating of two shades—the blue-gray used in painting the outer ring of the iris and the brownish-blue shade used to paint the collarette.

A jet black solid disc is placed on the backside of the iris to simulate the appearance of the pupil of the eye.

When the iris disc is dried it is imbedded in a tiny plastic lens, that is convex on the front surface and flat on the back surface. This lens takes the place of the eye's natural lens and in the plastic eye serves as a little magnifier that enlarges and intensifies the eye patterns and its colors.

An impression is next made of the patient's eye socket with a new type of compound that is chemo-setting. This new material, an alinate plastic, is mixed with water to make a paste that is injected with a syringe under the eye lid. It is used at body temperature and causes no pain or discomfort to the patient. The eye socket is filled with the material until it begins to seep out under the edge of the closed eye lid. In about five minutes it has become set to a rubber-like consistency. When it is painlessly removed, it gives a permanent record of every tissue contour within the eye socket. Any surgical stitching or tissue scars from the patient's eye operation are recorded.

This replica of the eye socket is used to make a plaster cast that is a duplicate of it, in reverse.

From the plaster cast negative, as it is called, a wax model of the eye ball is made. At this stage the tiny iris button is fitted into the wax and the whole unit is then fitted to the patient. The body emperature will melt the wax very slightly and help make it fit even better. Here, too, the

(Continued on Page 20)



The Artificial Plastic Eye Laboratory, located on the Second Floor of the Eye Section at Annex II, Brooke General and Convalescent Hospital.



Sergeant Harley O. Nelson of Falkland, North Carolina, presents an appointment slip to Private Arthur N. Voss of Houston, Texas. Sgt. Harley is reporting for an adjustment on his plastic eye.



First step in the making of an artificial plastic eye takes place when Private First Class Henry J. Mintz, technician, paints a disc matching the color to the iris of the good eye. The patient is Private Louis H. Hughes of Bethpage, Tennessee.



The Second step takes place when Technician Fourth Grade John D. Hall of Ekron, Kentucky (in background), makes the mould from plaster and then prepares the mould for the plastic. Private First Class Walter Spohn next forms and packs the plastic which makes the sclera or natural white of the eye.



Corporal Tom McCullough of Portland, Oregon, finishing the sclera before the polishing process takes place. The finishing is done with a dental hand piece and with it he removes excess plastic.



A close-up showing the artist applying tiny red rayon threads to the sclera to simulate veins. A tedious process, this, with the patient remaining present in order that the veins may be closely related to those of the good eye.



Private William Lytle of Jacksonville, Florida, Commercial Artist before entering the Service, is shown checking the design of the veins of the good eye with the sclera of the plastic eye so that the artificial eye when complete will have a natural look. The patient is Private Delbert Ferguson of Evansville, Indiana.



The finished artificial plastic eye, ready for insert in the patient's eye-socket. Muscles which formerly moved the good eye, now move the plastic eye with an effect that is very near to natural.



Major Kerwin M. Marcks, Plastic Surgery Consultant of the Eye Section and Major Emet P. Dickson, Eye Prosthesis Chief, check the finished product to determine naturalness of the plastic eye worn by Private First Class Luther Sells of Shiprock, New Mexico.

ARTIFICIAL PLASTIC EYES

(Continued from Page 15)

doctors can see if the front surface of the eye ball, its anterior curvature, is equal in both eyes.

After the artificial wax eye is properly fitted, it, in turn, is used as a model to make still another plaster cast replica. When the plaster is hardened the wax can be melted away and the cavity is filled with acrylic resin, tinted to the proper shade of the patient's natural eye ball.

The sclera plastic replica is baked for one hour at the temperature of boiling water under one-half ton of pressure. When it comes from the cast it has on its front surface the tiny little button disc that represents the iris.

The rough plastic casting is polished on a small abrasive wheel and particular attention is paid to changing the shape of the iris which, in nature, is never exactly circular.

Next come the blood vessels, arteries and veins which appear on the sclera of the normal eye. In the artificial eye these are made of tiny fibers of red rayon. Rayon is itself a plastic—cellulose xanthate—and it is therefore possible to dissolve the outer surface of the red fibers with a solvent consisting of 95 per cent alcohol and 5 per cent chloroform. The technician dips his tiny

brush into the solvent and picks up a single fiber of rayon and, as he does so, dissolves away its outer surface slightly and makes it sticky and tacky.

Then, rapidly, these veins are applied to the eye ball in typically normal patterns, which duplicate those of nature. Typical vein patterns upon the eye ball include: torturous, where the vein is curved in a series of little wiggles; sinous, a curved, snake-like pattern; knotted, where two or three veins join in a little knot-like clump; and branched, where two or three branch out from the larger veins. Each of these patterns can be duplicated on the eye ball with the rayon thread.

As a final step, the whole artificial eye is dipped quickly into a clear solution of the plastic and then held in the air while the excess material drips off. This gives the finished eye a gleaming fluid coating similar to the layer of liquid which covers the normal eye in real life.

The soldier patient probably will have his eye five years, ten years or 20 years from now because one additional advantage of the new plastic eyes is that they are practically indestructible. This is in sharp contrast to glass eyes which break easily if they are dropped. Plastic eyes can be bounced on the floor or they can be stepped upon without injury, although

no one would ever think of giving them, intentionally, such drastic treatment.

America entered the war with a small stockpile of ordinary glass eyes which sell from \$10 to \$20 without the medical fee for fitting them. A custom-made glass eye may cost up to \$300, depending upon the reputation of the maker. In contrast, the new plastic eyes can be made for much less and are superior in appearance, comfort and durability, rivaling the custom-made jobs in quality.

Soldiers to be trained as technicians to make artificial eyes are eagerly sought in the Army. So far, the men who have worked out best were dental technicians in civilian life. Such men have digital skill, which is required, and they are used to working with the plastic compounds because they have made artificial dentures in their peace-time job.

Credit for the new development, according to Major General Norman T. Kirk, the Surgeon General of the Army, goes to three dental officers: Captain Stanley F. Eruf, 141 Juniparo Sierra Boulevard, San Francisco, California; Major Milton S. Wirtz of Latimer, Iowa; and Major Victor H. Dietz, 3431 Jackson Boulevard, Chicago, Illinois, who pooled their separate knowledge of plastics, science and medicine, and aesthetic aptitude to found the artificial eye laboratory at Valley Forge General Hospital. Within six months they had perfected their technique so that they could train other men in 30 days to turn out the finished product. The three officers have now been assigned to other areas in the country, separately, so that each may continue experimentation and train still more technicians in this new art.

EMISSARIES FROM OVERSEAS

(Continued from Page 3)

increase 65 per cent, Gen. Marks says. The tire shortage is expected to approach half a million by the end of the first quarter of 1945, unless more tires are manufactured. Only a two weeks' supply of cotton duck remains in Army warehouses, and the canvas already in production is not sufficient.

Gen. Marks and his staff, which includes 38 ASF Area Representatives in principal Southwestern cities, has the assistance of the labor branch at command headquarters, as well as all public relations facilities in the command.

Five of "Eisenhower's Emissaries," enlisted men selected by the European commander to tell the people of the United States how badly ammunition is needed in that theater, have been in the Eighth Service Command for several weeks talking to workers in ordnance plants, appearing before labor and civic groups and interview-

ing workers applying for jobs at United States Employment Service offices.

Caravans of wounded soldiers have been recruiting ammunition and tire workers and telling the stories of their combat experiences to the workers who make the implements of warfare.

INFANTILE PARALYSIS DRIVE NETS \$667.05

Total contributions to the Infantile Paralysis drive at Brooke General and Convalescent Hospital, constitutes a total of \$667.05. This figure represents the highest amount collected for the drive in this area.

NEW WESTERN UNION TELEPHONE INSTALLED AT ANNEX II

A coin telephone has recently been installed for patients, military and civilian personnel at Annex II for the sending of Western Union Telegrams.

There are two other such coin telephones: one in the receiving office, "new" hospital (Building 1028) and one in the Red Cross House No. 2 at the "old" hospital.

All one needs to do is lift the receiver and immediately a Western Union operator answers.

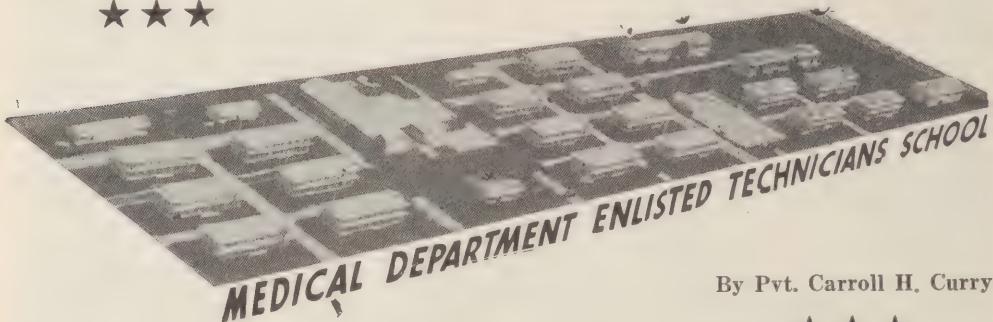
When the message is transmitted to the operator the person sending it will be informed of the cost. The money can then be deposited in the coin box of the telephone and the message will be on its way.

PICK UP THOSE EARPHONES

Just a reminder, fellows . . . About your "request program" which comes over your earphones on Monday-Wednesday-Friday and Saturday from 1:00 to 2:00 . . . Remember this is YOUR program and if there's any special recording you'd like to hear, let us know about it . . . and then, just pick up those earphones and you'll hear your request. We even give your home town and state, too . . . You may have a buddy here in the hospital and perchance hear his name over your request program. . . .

And that's not all . . . on Tuesday and Thursday, from 1:00 to 1:30, we have a new program called "Prize Package" . . . which you're sure to enjoy. It's thirty minutes crammed full of new hit tunes, old favorites . . . and the ever-popular "Novelty Tunes" . . .

Don't forget now . . . Have those earphones on at 1:00 o'clock and be a-listening!



By Pvt. Carroll H. Curry



NOTES FROM THE "CAMPUS"

Whenever you see a few members of the school staff with their heads together this week, be assured that the conversation centers around one big occurrence—the rumored marriage of a well-known "campus" officer. The unhappy has happened! Hades has frozen over! Captain "Casanova" Kelley is—of all things—married. Casanova (and we must use that term sparingly now), we all wish you and the missus all the happiness that life affords. Say—who is she? His only reply is, "Mrs. Kelley."

* * *

Before graduation on February 7, the boys were giving three-to-one odds that the WAC company would carry away the honors at the parade. They did!

* * *

Mustaches! Everyone has 'em, such as they are. Among those who are rather feebly attempting to sprout an upper lip adornment are Capt. Benedict, CO of Company "C," Perno the Great, of the mess staff, and Lew Hirshman, of headquarters. The latter is going all out, though. He swears it's going to be a handle bar.

* * *

The staff of the Medical Section persists in being fatherly, and still accompany Norma to the dentist's chair.

* * *

Slogan noticed in a film on care of teeth: "Be true to your teeth, or they'll be false to you."

* * *

Several requests have been received from the "Society of Chowhounds Unlimited," to announce the recent induction of

J. D. Hurst into that organization. Captain Kroner is still president.

* * *

Joe Filyo, of the post office, seems quite worried lately. No doubt he's wondering about the welfare of his ex-protégé, who left recently for Camp Barkeley.

* * *

Captain Loftis is on good terms with the world again. His wife is back. They say he wore out three can openers while he was "batchin'."

* * *

If you wish to see how the war is progressing, look in on the Co. B office or the infirmary. Their war maps are excellent. T-4 Jones, of Company B, says that "theah is no room foah dispute. Ouah maps excell those of the infuhmery."

* * *

Friends of Barksdale Payne have long been looking for a nickname for him. Now they call him "Tex."

* * *

It seems as though Colonel Fargo has been issuing special invitations to the more bashful officers to attend the morning calisthenics parties.

* * *

Captain Stout finds it difficult to work efficiently without the comfort and solace of "Texas music." From the clinic, all day long, one can hear the twang of guitars and the whir of the drill, as a background for the captain's singing of "Each Night at Nine."

* * *

We end with a bit of advice from Major Renick: "Don't try to write your own ticket in the army. Someone else always has the ranking pen."

THE RED CROSS DRIVE FOR WAR FUNDS begins February 28th. Support this worthy organization which has not only done so much to relieve the suffering of many of our soldiers overseas, but of needy families right here in our own America.

★
 "They're preparing for an offensive, alright, Fritz! Everywhere we look, some private is collecting all the valuables."

★



NOTE TO SOLDIER TRAVELERS TO CHICAGO

Soldiers who know they will be delayed passing through Chicago can find a hotel room now under a reservation plan adopted by the Sixth Service Command and the Greater Chicago Hotel Association.

The hotel association will set aside a different hotel each day in which a limited number of rooms will be retained for service men. Request for reservations should be sent to the Hotel Reservation Bureau Headquarters Sixth Service Command, Civic Opera Building, Chicago, Illinois, stating time and date of arrival and whether double or single room is desired.

When time does not permit confirmation of the reservation, the Military Police should be contacted upon arrival in Chicago to ascertain the status of the request.

ARMY ARTS CONTEST OPEN TILL MARCH 15TH

Army artists are being given an opportunity for regional and national recognition through an art contest, open to all Army personnel.

Contests are being held at posts and camps, general hospitals and other installations in the Eighth Service Command in February and early March. The best entries will be sent to Headquarters Eighth Service Command, Dallas, for a regional art exhibit April 29 to May 13 at the Dallas Museum of Fine Arts.

Thirty entries in the Dallas contest will

be selected by a civilian and military committee of judges to be sent to Washington for an exhibition in July at the National Gallery of Art.

In Washington entries from all service commands in the nation will be judged by a national jury. Winners in each class will be awarded \$100 war bonds. Certificates of merit also will be awarded.

The contest, sponsored by the Special Services Division of the Army Service Forces, is to stimulate interest in art as an off-duty recreational activity. Emphasis in judging will be placed on originality rather than technical excellence.

The eight classes in which Army artists will compete are: Oil paintings and tempera, water colors and gouache, mural designs, sculpture, renderings, drawings, prints, and photographs.

The Special Services Officer at Brooke can give you entry blanks and information on size limitations. Both officers and enlisted men and women may enter.

All entries for post shows must be in before March 15th. Winners from these shows must arrive in Dallas before April 1.

NEW SERVICE CLUB NOW OPEN

The Veterans of Foreign Wars Club, located on the river at 101 W. Commerce Street, San Antonio, invites Service men back from overseas to drop in and make themselves acquainted. The Club just recently opened and promises interesting events to service men and their friends.

GOLF EXPERTS EXHIBIT THEIR SKILL TO PATIENTS OF BROOKE



There was an excellent turnout of patients from the Brooke General and Convalescent Hospital on Wednesday, January 24th, when such well known Golf experts as Craig Wood, Bob Hamilton, Ed Dudley, Byron Nelson, Jimmy Hines, Jug McSpaden, Johnny Revolta and Sammy Byrd gave an exhibition at the Fort Sam Houston Golf Course. The event marked the first appearance made by the team on the start of a National instruction tour to General Hospitals throughout the country.



Left to right back row: Harold (Jug) McSpaden, Mike Turnesa, Bob Hamilton, Jimmy Demaret, Colonel John C. Woodland, chief of Medical Service at Brooke, Sam Byrd, winner of the Texas Open, Col. Walter C. Moore, Lt. A. D. Cobb Jr., Reconditioning Unit, Craig Wood, Fred Corcoran and Pfc. Dan Jacobson; front row: Dennis Shute, Sam Snyder, Johnny Revolta, Byron Nelson, Ashley Loafea, Golf Instructor at Reconditioning Unit, and Ed Fargol.

Educational-Reconditioning Section Sets Up Map Orientation Centers



Left to right, Pfc. Alex X. Cation of Greenwood, Mississippi; Pvt. Lacy Brewer of Greenwood, Mississippi; Pvt. Carol S. Humble of Dwale, Kentucky, and Pvt. Jack Nabors of Ada, Oklahoma, refer to the maps in one of the map orientation centers set up by the Information and Education Section of the Reconditioning Unit at Brooke.

Aware of the urgent need for an up-to-the minute, comprehensive, clear-cut presentation of the news of the world and on-the-spot, graphic portraits of these news events, the Information and Education Section of the Educational Reconditioning Department has developed five map orientation centers for the use of G.I. Joe and his friends at the Brooke General Hospital.

These centers are specifically designed to summarize the latest developments on contemporary national and international fronts as fully and as effectively as possible. Each center is equipped with maps of the European and Pacific areas, and through the use of colored yarn extensions to attached news clippings, these maps portray the "Hot Spots" of action in the world events of the day.

With the battlefronts changing constantly, with the news developments reaching more significantly each day into the life of each soldier, with the ever-tightening grip of the Allies on the Axis fronts and the expanding Allied lines, these Map Orientation Centers give G.I. Joe a clearer insight into the war's progress and into the growing problems of the war, and the peace to follow.

These centers are open daily at:
Library—Red Cross, New Hospital
Library—Annex II
Library—Red Cross, Old Hospital
Reading Room, Annex III
Back Porch, Main Building, Annex IV
Visit your nearest Map Orientation Center once, and become a regular "Center Go-er."

RED CROSS ACTIVITIES AT B.G.H.



Mrs. Jack Watts, Gray Lady of the Red Cross is shown above helping Sergeant Dan G. Shelby of Tuscaloosa, Alabama, to tie the rug he is making. Sergeant Shelby just recently returned from Leyte Island in the Philippines.

"GRAY LADY OF THE YEAR"

By Mrs. Gertrude Mann
"Gray Lady"

The activities of the Gray Ladies of the Brooke General and Convalescent Hospital are many but the one that has seen the most growth the past year is Hand Craft, which comes under the supervision of the Occupational Therapy Section.

It all started about a year ago when a group of four Gray Ladies under the able leadership of Mrs. Jack Watts decided to contact Class IV patients to see if they would be interested in Hand Craft. The Occupational Therapy section promised full support and the work was on.

Nearly everyone around Brooke knows the answer. Bed patients found that they could make various small articles that not only helped to while away long hours in the hospital, but aided them to exercise arm and hand muscles which they had not used in months.

Besides the very attractive rugs which patients can easily make right in bed, they design smart-looking plastic bracelets, or trim combs with colorful beads. They weave very unusual belts, too.

And very much of the credit for this important work in the wards goes to Mrs. Watts.

Proof of the splendid results obtained in introducing Hand Craft lies in the following figures which speak for themselves: In the past six months, 7,915 patients have been contacted and 11,069 projects completed with a total of 36,628 hours put to good use by the patients.

Mrs. Watts contributed largely to these figures, having herself, contacted 1,754 patients with 3,135 projects completed in which the patients worked 8,839 hours.

From the small group of four Gray Ladies who started it all, the work has spread throughout the entire hospital. There are now TWENTY-EIGHT Gray Ladies assisting Mrs. Watts and more are urgently needed to keep up with the interest and enthusiasm shown by new patients arriving daily at Brooke.

Mrs. Watts has been a most capable and gracious Gray Lady for several years but her work in Hand Craft is really outstanding. So—to you Mrs. Watts who has given so generously of your time (approximately 100 hours a month) goes sincere THANKS and CONGRATULATIONS for your work and the efforts of your able assistants.

RED CROSS NEWS FROM THE "OLD HOSPITAL"

Reported by Miss Virginia Frye
Recreational Worker

"Hello, there. You're new at Brooke, aren't you? We're awfully glad to meet you—and we hope we'll see a lot of you at the Red Cross House during your stay here."

* * *

"Goodbye. Have a wonderful time on your furlough, and come see us when you get back."

* * *

"... and by tomorrow you say you'll be Mr. _____ again? Best of luck to you. You surely have our very best wishes for lots of happiness ahead."

* * *

"We're glad to see you again. It's easy to see what a wonderful time you've had on that furlough. Bet your Mom's cooking tasted better than ever, didn't it?"

* * *

Above are quoted snatches of conversations you would hear almost any time you might step into the Red Cross House. Sometimes it seems to us as though we have as much hub-bub about goings and comings as could be found in any railroad station. It's a real thrill for us when you come by with an ear-to-ear grin because you are on the way home; or when you get back from furlough, and we see how happy you look as you recall the wonderful days you've just spent at home. Best of all we like to see the new patients who arrive from all parts of the world begin to enjoy and feel at home in our House. We'll do our best to make it as good a home as any substitute can be until you are able to enjoy the real thing again.

While we're speaking about arrivals and departures, we want to extend our best wishes to our former Red Cross staff member, Eloise Whitney, Miss Whitney is now assigned to Percy Jones General Hospital at Battle Creek, Michigan. During her stay of more than a year at Brooke, she made scores of friends among the patients and the staff. All of us miss her a great deal.

* * *

Have you noticed the attractive designs lately on our weekly bulletins announcing the recreational activities in our buildings? Cred goes to Rita McTigue. If you want to make a hit with her, just ask her to tell you about Camp Maxey. We have a sneaking suspicion that Rita sort of likes that place.

"HOW'S ABOUT A CUP OF COFFEE"

By Miss Evalyn Turner
Recreational Worker

We'd like to have you drop in at the dayroom of Annex II about 2:30 any Monday, Wednesday, or Friday afternoon and join us in a cup of coffee. Various churches and civic groups are now sponsoring these coffee hours.

On Fridays you can depend on delicious home made cakes furnished by the various branches of the Order of the Eastern Star and the auxiliary of the Post Chapel. They are beautiful ones!

On Mondays and Wednesdays six local church groups and the Woman's Benefit Association bring home-made sandwiches, cake or cookies which are such a treat to all of us. Sometimes the line waiting to be served gets pretty long, but it always is worth the wait—both for the food and the sociability.

Our very loyal Gray Ladies are always on hand for our coffee hours, working and visiting and making everyone welcome and comfortable. On Wednesdays they would like to have you join in their Bingo game as well as have coffee. You will enjoy it.

Staff Sergeant Edwards from ward 50-B is a very loyal helper in handling those big hot pots of coffee. We always depend on him. Many a patient has carried coffee to us from the mess hall where our mess sergeants so willingly make our coffee. Patients also help with serving—and yes, cleaning up, too.

We have a good time. Come and see for yourself.

* * *

USO CAMP SHOW

Reported by Rita McTigue
Recreation Worker

Patients were treated to one of the liveliest USO shows which this post has seen in a long time. The performance was given in both Red Cross buildings recently. The performers were girls from City College, Los Angeles. Amid the cheers and whistles of the men, the girls put forth their all in brief, but colorful, costumes. The patients thank these talented young ladies and hope to have them return in the near future.

FEBRUARY IS ACCIDENT PREVENTION MONTH

In an intensive effort to prevent accidents not only during February—
Accident Prevention Month—but during every month in the
year, the Post Safety Director has announced a

SAFETY POSTER ★ CONTEST ★ OPEN TO ALL PATIENTS AT BROOKE

IF YOU CAN DRAW—

Submit a poster and if your poster is judged the best entry, you can

WIN A \$25.00 WAR BOND

IF YOU CAN'T DRAW—

Submit an idea for a poster and if your idea is judged the best entry, you can

WIN \$7.50 IN WAR STAMPS

In the belief that Safety Posters carrying out ideas on accident prevention would call the attention of Military and Civilian Personnel of the Brooke General and Convalescent Hospital to exercise care in preventing accidents about the hospital—not only during February, but all through the year, Captain Raymond N. Barr, Post Safety Director for the hospital has announced a SAFETY POSTER CONTEST.

If you can draw and your poster is judged the best idea for preventing an accident, you can win a \$25.00 War Bond. If you can't draw, but you have a good idea for a contest, submit it. If it is judged the best, you can win \$7.50 in War Stamps.

Rules of the contest are simple:

If you plan on drawing a poster, it must be shaped oblong with the drawing done vertically and the poster should be scaled to the size of the Brooke Bluebonnet Broadcast, the hospital publication. The size is 5½x8 inches and if you want to make your poster twice the size, it will be 10¼x16 inches or if larger, 15¾x24 inches.

Not only will the winning poster be reproduced for the hospital publication but all posters submitted will be used in succeeding issues of the Brooke Bluebonnet Broadcast after the prize winning design

is announced. Even the best ideas submitted will be worked up into posters by designated artists of the hospital and those too will be reproduced in the B.B.B.

Your drawing should be in black and white, for easy reproduction.

If you submit an idea for a poster, write in ink or typewriter your idea on white paper, using one side only.

Your name, rank and serial number must be securely fastened or written on your drawing or on the idea you submit.

When your idea or your poster is ready, bring it or send it to the Special Services Officer, attention Capt. R. G. Van Gilder, main building, new hospital.

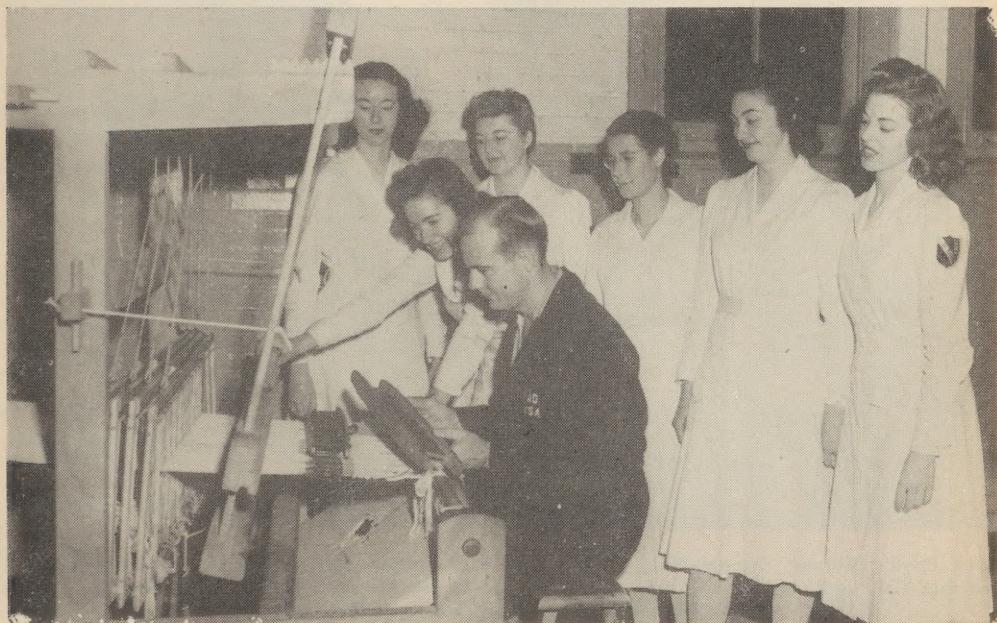
The contest is open during the entire month of February and all entries must be in the office of the Post Safety Director not later than March 1st at noon.

Five judges to be selected from Military and Civilian personnel of the hospital will elect the winning poster and the winning idea.

Winners will be announced by March 15.

If you need drawing paper and other supplies for your poster or idea, it will be supplied to you without charge by the Special Services Officer.

Brooke Now Training Student Occupational Therapy Apprentices



Mary Joyce Whitlock of Santa Cruz, California, enthusiastically admires the color scheme used in the rug being made by Cpl. Ralph J. Keaton of Durham, North Carolina, patient at Brooke. Looking on, left to right, are: Marjorie Nicholson of Berkeley, California; Elsa Jensen of Preston, Nevada; Mary Louise Fry of Columbus, Ohio; Ruth Pray of Ferrley, Nevada, and Geneva Mary Thompson of Denver, Colorado, all newly reported students at Brooke in training to become Occupational Therapy aides.

Brooke General and Convalescent Hospital has been designated as a training center for student Occupational Therapy Apprentices. The first six students to report for training are shown in the photo above.

The emergency training of Occupational Therapists was set up to help the army obtain trained Occupational Therapists for General and later for Regional hospitals. Students must have a college degree, with a major in industrial, fine, or applied arts, and be skilled in at least three manual crafts before they become eligible for the army-sponsored short course of four months in a college contracting to train students for army hospitals.

After completing this course the student is assigned to a General hospital for 8 months practical training under Registered Occupational Therapists, who complete their course in both actual patient corrective treatment and scholastic work. They are given Orientation and Drill with the Army Nurse training program and attend classes

with student Physical Therapists.

When the eight-month period is completed, students are given an examination and upon successful completion, they become Registered Occupational Therapy Aides.

The six students who have already reported to Brooke General and Convalescent Hospital include Marjorie Nicholson of Berkeley, California and Mary Joyce Whitlock of Santa Cruz, California, both graduates of Mills College of California; Elsa Jensen of Preston, Nevada; Ruth Pray of Ferrley, Nevada, and Geneva Mary Thompson of Denver, Colorado, all graduates of the University of Southern California and Mary Louise Fry of Columbus, Ohio, who graduated from Richmond Professional Institute of Richmond, Virginia.

First registered Occupational Therapy Aide to be assigned to the Brooke General and Convalescent Hospital is Miss Phyllis Giltner who hails from Marion, Indiana,



Miss Phyllis Giltner, Occupational Therapy Aide at Brooke General and Convalescent Hospital watches Cpl. Leslie Miller of Akron, Iowa, patient of the hospital, use the printing press in one of the Occupational Therapy Shops of the hospital.

and is a graduate of the St. Louis College of Occupational Therapy.

Miss Giltner's training here has been quite intense. She has had practical experience in corrective work in all phases of the activities carried on at Brooke General and Convalescent Hospital, working in each of the seven Occupational Therapy shops in the O.T. office, and doing O.T. ward work, too.

Miss Giltner has made hundreds of friends while here and is to be congratulated for her achievements. Continued success in her work at the Brooke General and Convalescent Hospital, is the wish of all who know her.

SAN ANTONIO TRAFFIC CLUB HONORS WORLD WAR II VETS

At a luncheon held at the Gunter Hotel on 22 January, twenty-five World War II Veterans of Brooke General and Convalescent Hospital, were honored by the Traffic Club of San Antonio.

Five of the veterans made brief talks of their experiences overseas. They were, F/Sgt. Sidney Sharpe of Milwaukee, Wisconsin, who spoke of his experiences at Anzio; S/Sgt. Harvey Bradley of Reno, Nevada, who was in combat in France;

S/Sgt. Ralph E. Martinez of Austin, Texas and formerly a tail gunner on a B-17 which made several combat missions over Germany; Pfc. George Y. Taketa of Hilo, Hawaii, wounded in Italy as a member of the famed 100th Infantry, 34th Division, and Pfc. Clinton G. Briggs of Fort Worth, Texas, wounded in Italy.

Other attending the luncheon were: Joe Leonard of San Antonio, Sgt. Arnold L. Harolson of Sioux City, Iowa; Sgt. Harry E. McDougal of Keifer, Oklahoma; Sgt. Dan G. Shelby of Tuscaloosa, Alabama; Sgt. Walter A. Rhodes of Oklahoma City, Oklahoma; T/4 Bruce C. Leonard of Weatherford, Oklahoma; Pfc. Howard C. Biggs of Fort Worth, Texas; Pfc. Francisco Canto of Karnes City, Texas; Pfc. Robert W. Ducklew of Gladewater, Texas; Pfc. Luther H. Griffith of Santa Anna, Texas; Pfc. Elmer A. Hill of Murphysboro, Illinois; Pfc. Samuel M. Jones of Tampa, Texas; Pfc. Marvin F. Pulliam of Gatewood, Missouri; Pvt. Liston Dailey of Sweetwater, Texas; Pvt. Levi F. Falknor of Houston, Texas; Pvt. Perry A. Lackey of Birmingham, Alabama; Pvt. Linn D. Lafferty of Clarksburg, Texas; Pvt. Harold Shoemaker of Post, Texas; Pfc. Woodrow Goodner of Henrietta, Texas; and Pvt. Joseph W. Hicks of Columbus, Georgia.

FORMER PROPERTY OFFICER AT BROOKE RECEIVES BRONZE STAR MEDAL AS A MEMBER OF 90th INFANTRY DIVISION IN GERMANY . . .

Per G.O. No. 199, dated 13 December, 1944, citation reading as follows: "The unselfish and heroic tenacity of purpose of this officer under enemy fire is in accordance with military tradition . . ." Second Lieutenant Austin W. Richey, former MAC Property Officer at Brooke, was awarded the Bronze Star Medal.

Thus was the information received recently in a letter from Lt. Richey to Lt. Fred Leisering, Hospital Inspector. Lt. Richey's letter, typewritten on a captured German typewriter and dated 23 December 1944, read, in part . . . "Last night was the first bath and change of clothes I have had in over a month. I had to burn the suit of OD's to keep them from following me around." It continued, "This typewriter is really the thing. It is German of course and some of the keys are different but about the only ones that make any difference are the Y and Z and turned around, but on this machine I have changed them back like they should be . . ."

"MONTICELLO" YEAR BOOK DEDICATED TO BROOKE GENERAL HOSPITAL IN 1944 AWARDED THE "VICTORY STAR"

The "Monticello" Year Book of the Thomas Jefferson High School was recently awarded the "Victory Star" for its dedication of the 1944 Year Book to Brooke General and Convalescent Hospital.

The high honor which is now awarded to schools whose Year Books do constructive work in the war effort, is one of three awards which the "Monticello" earned for itself the past year. The other two awards include the "Medalist" and the "All-American."

In the entire United States and its possessions, only 16 "Victory Stars" are given each year. The "Monticello" was the only Year Book in Texas to receive this high award for the past year's work. Only one other Year Book, "The Wildcat" (Springfield, Ohio) received all three awards the past year. And only four Year Books in the entire United States won even the two journalistic honors—the "Medalist" and "All-American." No other award of the "Medalist" was made in

Texas. And there was only one other "All-American" award in Texas—that to the Year Book of the Paris, Texas, High School.

Thomas Jefferson High School and the staff of the "Monticello" are justly proud of their awards and rightly so. No more enthusiastic group of students are to be found anywhere.

The SCHOLASTIC EDITOR, National magazine for all student publications was impressed to the extent it featured the dedication of the "Monticello" to Brooke in its January 1945 issue. And this in itself is considered a real honor by the staff of the "Monticello" Year Book.

GRAND OPERA FESTIVAL OPENS FEBRUARY 20th.

Reservations for the Opera Festival starring Grace Moore, Nino Martini, Frederick Jagel and nine other "Met" artists have been coming in from points as distant as Mexico City and Oklahoma, Symphony Society officials report, and good locations are going fast. A special ticket at \$1 for enlisted personnel and other seats at \$2 to \$6 are available at the auditorium box office.

Max Reiter, the man who founded the San Antonio Symphony orchestra, tops off the 20-weeks season of concerts with the "Grand Opera Festival Week" for February 20-25, is no amateur at his job.

Because Max—as he is known in these parts—started his career as assistant conductor under great Bruno Walter at the Berlin Opera House, he wants the Yanks to get over there and re-civilize the barbarians—probably more than anybody around here. He was conductor of the Symphony orchestras of both Milan and Trieste in Italy, and then, being kicked out as anti-fascist, is doing a great job of transferring Italy's famed musical prestige to Texas. When he presents Mascagni's "Cavalleria Rusticana" in his Opera Festival he may be remembering the compliments of its composer after directing one of Mascagni's works as guest conductor of the celebrated Molinari in Rome. Our San Antonio Symphony Orchestra's conductor also toured all Russia with the Leningrad Orchestra.

Wall-space in his modest office at 209 Travis building is covered with felicitations from such names as those mentioned and Toscanini, Stokowski, and all the other musical by-lines musical GIs would know. Drop around and look on if you are so inclined.

Pvt. Dimbulb - HE AINT RIGHT BRIGHT!

"GETTIN' RECONDITIONED"

